UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/705,915	11/13/2003	Hye Jeong Jeon	24286/81451	7327	
37803 SIDLEY AUST	7590 04/10/200 'IN LLP	8	EXAMINER		
555 CALIFORI		DEBROW, JAMES J			
SUITE 2000 SAN FRANCISCO, CA 94104-1715			ART UNIT	PAPER NUMBER	
			2176		
			MAIL DATE	DELIVERY MODE	
			04/10/2008	PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	10/705,915	0/705,915 JEON ET AL.	
interview Summary	Examiner	Art Unit	
	JAMES J. DEBROW	2176	
All participants (applicant, applicant's representative, PTC	personnel):		
(1) <u>JAMES J. DEBROW(USPTO)</u> .	(3) <u>FERENCE PAZMANDI</u>	•	
(2) <u>DOUH HUTTON (USPTO)</u> .	(4)		
Date of Interview: <u>02 April 2008</u> .			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant	2)⊠ applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>1</u> .			
Identification of prior art discussed: <u>Azami</u> .			
Agreement with respect to the claims f)☐ was reached.	g)⊠ was not reached. h)□ N	\/ A.	
Substance of Interview including description of the general reached, or any other comments: Applicant attempted to pinvention in regards to the previous office action. The Example of the previous office action. The Example of the Interview of In	noint out the differences in cited to miner agrees to take applicant adments which the examiner agreed to the amendments that ved.) ACTION MUST INCLUDE THE le last Office action has already ROF ONE MONTH OR THIRT	reed would render the SUBSTANCE Control of the SUBSTANCE Control of the Substance of the Su	er the claims claims OF THE LICANT IS
INTERVIEW DATE, OR THE MAILING DATE OF THIS IN FILE A STATEMENT OF THE SUBSTANCE OF THE INTI requirements on reverse side or on attached sheet.			
Examiner Note: You must sign this form unless it is an	/JAMES J. DEBROW/ Examiner's signature, if requi	rod	
Examine Note. Tou must sign this long unless it is an	Exammer 5 Signature, ii fequi	ICU	

Application No.

Applicant(s)